

<b>FORM B1</b>		<b>United States Bankruptcy Court Northern District of Illinois</b>		<b>Voluntary Petition</b>																					
Name of Debtor (if individual, enter Last, First, Middle): <b>Douse, Aviva A.</b>			Name of Joint Debtor (Spouse) (Last, First, Middle):																						
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																						
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>7751</b>			Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all):																						
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>Garden Apartment 329 South Leavitt Street Chicago, IL</b>			Street Address of Joint Debtor (No. & Street, City, State & Zip Code):																						
ZIPCODE <b>60612-3034</b>			ZIPCODE																						
County of Residence or of the Principal Place of Business: <b>Cook</b>			County of Residence or of the Principal Place of Business:																						
Mailing Address of Debtor (if different from street address): <b>Box 7574 Westchester, IL</b>			Mailing Address of Joint Debtor (if different from street address):																						
ZIPCODE <b>60154-7574</b>			ZIPCODE																						
Location of Principal Assets of Business Debtor (if different from street address above):																									
ZIPCODE																									
<b>Type of Debtor</b> (Form of Organization) (Check one box.)		<b>Nature of Business</b> (Check all applicable boxes.)		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)																					
<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and provide the information requested below.) State type of entity:		<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Nonprofit Organization qualified under 15 U.S.C. § 501(c)(3)		<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <input checked="" type="checkbox"/> Chapter 13																					
				<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business																					
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				<b>Chapter 11 Debtors:</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2 million.																					
<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.				THIS SPACE IS FOR COURT USE ONLY																					
Estimated Number of Creditors																									
<table style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;">1-49</td><td style="text-align: center;">50-99</td><td style="text-align: center;">100-199</td><td style="text-align: center;">200-999</td><td style="text-align: center;">1,000-5,000</td><td style="text-align: center;">5,001-10,000</td><td style="text-align: center;">10,001-25,000</td><td style="text-align: center;">25,001-50,000</td><td style="text-align: center;">50,001-100,000</td><td style="text-align: center;">Over 100,000</td></tr><tr><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input checked="" type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr></table>						1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): <b>Douse, Aviva A.</b>	
<b>Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than one, attach additional sheet)			
Location Where Filed: <b>N. D. IL., Eastern Div.</b>		Case Number: <b>05 B 24599 (Ch 13)</b>	Date Filed: <b>06/21/05 (Hollis)</b>
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>None</b>		Case Number:	Date Filed:
District:		Relationship:	Judge:
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.  <b>X</b> <u>/s/ Timothy K. Liou</u> <b>7/18/06</b> Signature of Attorney for Debtor(s) Date	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?  <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		<b>Certification Concerning Debt Counseling by Individual/Joint Debtor(s)</b>  <input checked="" type="checkbox"/> I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition  <input type="checkbox"/> I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing.)	
<b>Information Regarding the Debtor (Check the Applicable Boxes)</b> <b>Venue</b> (Check any applicable box)  <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Statement by a Debtor Who Resides as a Tenant of Residential Property</b> <i>Check all applicable boxes.</i>  <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  _____ (Name of landlord or lessor that obtained judgment)  _____ (Address of landlord or lessor)  <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and  <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			

<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): <b>Douse, Aviva A.</b>	
<b>Signatures</b>			
<b>Signature(s) of Debtor(s) (Individual/Joint)</b> I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  <b>X</b> <u>/s/ Aviva A. Douse</u> Signature of Debtor <b>Aviva A. Douse</b>  <b>X</b> _____ Signature of Joint Debtor  _____ Telephone Number (If not represented by attorney) <b>July 18, 2006</b> Date		<b>Signature of a Foreign Representative</b> I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign main proceeding, and that I am authorized to file this petition. A certified copy of the order granting recognition is attached. (Check one box only)  <input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.  <input type="checkbox"/> Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.  <b>X</b> _____ Signature of Foreign Representative  <b>X</b> _____ Printed Name of Foreign Representative  _____ Date	
<b>Signature of Attorney</b>  <b>X</b> <u>/s/ Timothy K. Liou</u> Signature of Attorney for Debtor(s) <b>Timothy K. Liou 06229724</b> Printed Name of Attorney for Debtor(s) <b>Law Office Of Timothy K. Liou</b> Firm Name <b>Suite 361, 575 West Madison Street</b> Address <b>Chicago, IL 60661-2614</b>  <b>(312) 474-7000</b> Telephone Number <b>July 18, 2006</b> Date		<b>Signature of Non-Attorney Petition Preparer</b> I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.  _____ Printed Name and title, if any, of Bankruptcy Petition Preparer  _____ Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)  _____ Address  _____  <b>X</b> _____ Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.  _____ Date  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:    If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. <i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.</i>	
<b>Signature of Debtor (Corporation/Partnership)</b> I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.  The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.  <b>X</b> _____ Signature of Authorized Individual  _____ Printed Name of Authorized Individual  _____ Title of Authorized Individual  _____ Date			

IN RE:

Case No. \_\_\_\_\_

Douse, Aviva A.

Chapter 13

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ **3,000.00**

Prior to the filing of this statement I have received ..... \$ \_\_\_\_\_

Balance Due ..... \$ **3,000.00**

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
  - e. [Other provisions as needed]

**Services as provided in attached Attorney Fee Agreement.**

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:  
**Representation pursuant to Sec. 523 shall be billed at \$295.00 per hour.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**July 18, 2006**

Date

**/s/ Timothy K. Liou**

Signature of Attorney

**Law Office Of Timothy K. Liou**

Name of Law Firm

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

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In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

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**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### **Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### **Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### **3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

### **Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

\_\_\_\_\_  
Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

\_\_\_\_\_  
Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**X** \_\_\_\_\_

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

### **Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

**Douse, Aviva A.**

Printed Name(s) of Debtor(s)

**X /s/ Aviva A. Douse**

Signature of Debtor

**7/18/2006**

Date

Case No. (if known) \_\_\_\_\_

**X** \_\_\_\_\_

Signature of Joint Debtor (if any)

Date

Douse, Aviva A.  
Box 7574  
Westchester, IL 60154-7574

ComCast  
Box 173908  
Denver, CO 75587

MCI Telecommunications  
Box 4600  
Iowa City, IA 52244-4600

Law Office Of Timothy K. Liou  
Suite 361, 575 West Madison Street  
Chicago, IL 60661-2614

Cross Country Bank  
Box 310711  
Boca Raton, FL 33431-0711

Medical Payment Center  
Box 12442  
Fort Wayne, IN 46863

A T & T Wireless  
1600 Southwest 4th Avenue  
Portland, OR 97201

Emergency Medical Specialists  
34404 Eagle Way  
Chicago, IL 60678

Midland Credit Management  
Box 939019  
San Diego, CA 92193

Americas Choice  
Box 89  
Great Falls, MT 59403

Georgio Douse  
4335 West Washington Boulevard  
Chicago, IL 60624

MRSI  
2200 East Devon Avenue  
Des Plaines, IL 60018

Asset Acceptance Llc  
Po Box 2038  
Warren, MI 48090

Harris Bank  
111 West Monroe Street  
Chicago, IL 60690-0755

Oxford Collection Agency  
135 Maxess Road  
Melville, NY 11747

Blue Cross Blue Shield  
300 East Randolph  
Chicago, IL 60601

Hearing Help Express  
105 North First Street  
Dekalb, IL 60115

Peoples Gas  
Special Projects  
130 East Randolph Drive  
Chicago, IL 60601-6207

Capital One  
Box 85167  
Richmond, VA 23285-5167

Illinois Collection Service  
Suite 1385  
75 Remittance Drive  
Chicago, IL 60675

PNC Bank, National Association  
Box 648, 227 West Dixie Avenue  
Elizabethtown, KY 42702

Centrix Resource Systems  
Box 17669  
Denver, CO 80217-0669

Illinois Collection Service  
4647 West 103rd Street  
Box 646  
Oak Lawn, IL 60454

Providian National Bank  
4940 Johnson Drive  
Pleasanton, CA 94588

Chicago Imaging Association  
36515 Treasury Center  
Chicago, IL 60694

KCA Financial Services  
628 North Street  
Box 53  
Geneva, IL 60134

Safeway Insurance  
1 Hanger Road  
Romeoville, IL 60446

Colorado Bankers Life Insurance  
Box 17007  
Denver, CO 80217

Loyola University Medical Center  
2160 South First Avenue  
Maywood, IL 60153

SBC  
Consumer Bankruptcy Center  
Box 769  
Arlington, TX 76004-0769

St. Joseph Hospital  
135 South La Salle Street  
Chicago, IL 60674

University Of Illinois Medical Center  
Box 12442  
Fort Wayne, IN 46825

TCF Financial Services  
Box 1270  
Minneapolis, MN 55480-1270

University Of Illinois Medical Center  
Box 12199  
Chicago, IL 60612

The University Of Illinois At Chicago  
135 South La Salle Street  
Chicago, IL 60674

Wells Fargo  
Box 250  
Essington, PA 19029

The University Of Illinois Medical Cente  
Box 12199  
Chicago, IL 60612

U.S. Dept Of Education  
National Collections Center  
Box 4169  
Greenville, TX 75403-4169

University Of Chicago Physicians Group  
Box 75307  
Chicago, IL 60675-5307

University Of Illinois At Chicago  
Physician Gruop  
135 South La Salle Street  
Chicago, IL 60674-3293

University Of Illinois Medical Cen.  
Box 12442  
Fort Wayne, IN 46825

University Of Illinois Medical Center  
135 South LaSalle Street, Dept 8332  
Chicago, IL 60674

University Of Illinois Medical Center  
Box 12442  
Fort Wayne, TX 46825



**IN RE:**

Case No. \_\_\_\_\_

**Douse, Aviva A.**

Chapter **13**

Debtor(s)

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	\$ <b>0.00</b>		
B - Personal Property	<b>Yes</b>	<b>2</b>	\$ <b>6,176.00</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		\$ <b>17,567.26</b>	
E - Creditors Holding Unsecured Priority Claims	<b>Yes</b>	<b>1</b>		\$ <b>0.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>9</b>		\$ <b>29,814.17</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ <b>2,578.33</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ <b>2,239.00</b>
		<b>TOTAL</b>	<b>19</b>	\$ <b>6,176.00</b>	\$ <b>47,381.43</b>

IN RE:

Case No. \_\_\_\_\_

Douse, Aviva A.

Chapter 13

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159)**  
**[Individual Debtors Only]**

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor was Intoxicated (from Schedule E)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
<b>TOTAL</b>	<b>0.00</b>

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint or "C" for Community in the column labeled "HWJC." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
<b>TOTAL</b>			<b>0.00</b>	

(Report also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X	<b>Savings account held by Access Credit Union</b>		<b>1.00</b>
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X	<b>Miscellaneous depreciated household goods and furnishings</b>		<b>500.00</b>
4. Household goods and furnishings, include audio, video, and computer equipment.	X			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X	<b>Necessary wearing apparel and shoes</b>		<b>200.00</b>
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(3). 11 U.S.C. § 521(c); Rule 1007(b)).	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			

SCHEDULE B - PERSONAL PROPERTY

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	<b>X</b>			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) in customer lists or similar compilations provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>2002 Hyundai Santa Fe GLS Sport Utility 4D w/68k miles</b>		<b>5,475.00</b>
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.	<b>X</b>			
29. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>			
30. Inventory.	<b>X</b>			
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			
<b>TOTAL</b>				<b>6,176.00</b>

0 continuation sheets attached

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds \$125,000.

(Check one box)

☐ 11 U.S.C. § 522(b)(2)☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
Savings account held by Access Credit Union	735 ILCS 5/12-1001(b)	1.00	1.00
Miscellaneous depreciated household goods and furnishings	735 ILCS 5/12-1001(b)	500.00	500.00
Necessary wearing apparel and shoes	735 ILCS 5/12-1001(a)	200.00	200.00
2002 Hyundai Santa Fe GLS Sport Utility 4D w/68k miles	735 ILCS 5/12-1001(c)	1,200.00	5,475.00

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child." and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL  UNSECURED PORTION, IF ANY
Account No. <b>347-62-7751</b> <b>Wells Fargo</b> <b>Box 250</b> <b>Essington, PA 19029</b>			<b>09/2002; Title to 2002 Hyundai Santa Fe GLS Sport Utility 4D; contractual monthly payment was \$500.00</b>				<b>17,567.26</b>
			Value \$ <b>5,475.00</b>				<b>12,092.26</b>
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Subtotal (Total of this page)							<b>17,567.26</b>
(Use only on last page of the completed Schedule D) <b>TOTAL</b> (Report total also on Summary of Schedules)							<b>17,567.26</b>

0 continuation sheets attached

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "HWJC." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Other Certain Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached



IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>347-62-7751</b> <b>A T &amp; T Wireless</b> <b>1600 Southwest 4th Avenue</b> <b>Portland, OR 97201</b>			<b>collection</b>				<b>579.06</b>
Account No. <b>ZE031009-4</b> <b>Americas Choice</b> <b>Box 89</b> <b>Great Falls, MT 59403</b>			<b>collection</b>				<b>38.00</b>
Account No. <b>R58502593</b> <b>Blue Cross Blue Shield</b> <b>300 East Randolph</b> <b>Chicago, IL 60601</b>			<b>medical service</b>				<b>842.00</b>
Account No. <b>347-62-7751</b> <b>Capital One</b> <b>Box 85167</b> <b>Richmond, VA 23285-5167</b>			<b>charge</b>				<b>1,021.33</b>
Account No. <b>347-62-7751</b> <b>Centrix Resource Systems</b> <b>Box 17669</b> <b>Denver, CO 80217-0669</b>	<b>X</b>		<b>collection</b>				<b>8,144.00</b>

8 continuation sheets attached

Subtotal  
(Total of this page)**10,624.39**(Use only on last page of the completed Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>787501A</b> <b>Chicago Imaging Association</b> <b>36515 Treasury Center</b> <b>Chicago, IL 60694</b>			<b>collection</b>				<b>32.00</b>
Account No. <b>0672733</b> <b>Colorado Bankers Life Insurance</b> <b>Box 17007</b> <b>Denver, CO 80217</b>			<b>collection</b>				<b>268.00</b>
Account No. <b>6105-0013</b> <b>ComCast</b> <b>Box 173908</b> <b>Denver, CO 75587</b>			<b>collection</b>				<b>150.00</b>
Account No. <b>347-62-7751</b> <b>Cross Country Bank</b> <b>Box 310711</b> <b>Boca Raton, FL 33431-0711</b>			<b>charge</b>				<b>1,014.00</b>
Account No. <b>001 2868</b> <b>Emergency Medical Specialists</b> <b>34404 Eagle Way</b> <b>Chicago, IL 60678</b>			<b>collection</b>				<b>12.00</b>
Account No. <b>347-62-7751</b> <b>Harris Bank</b> <b>111 West Monroe Street</b> <b>Chicago, IL 60690-0755</b>			<b>collection</b>				<b>258.00</b>
Account No. <b>030331308</b> <b>Hearing Help Express</b> <b>105 North First Street</b> <b>Dekalb, IL 60115</b>			<b>collection</b>				<b>633.00</b>

Sheet no. 1 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **2,367.00**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>347-62-7751</b> <b>Illinois Collection Service</b> <b>Suite 1385</b> <b>75 Remittance Drive</b> <b>Chicago, IL 60675</b>			<b>collection</b>				<b>59.00</b>
Account No. <b>4432465</b> <b>Illinois Collection Service</b> <b>4647 West 103rd Street</b> <b>Box 646</b> <b>Oak Lawn, IL 60454</b>			<b>collection</b>				<b>60.00</b>
Account No. <b>8385348</b> <b>Illinois Collection Service</b> <b>4647 West 103rd Street</b> <b>Box 646</b> <b>Oak Lawn, IL 60454</b>			<b>collection</b>				<b>170.00</b>
Account No. <b>347-62-7751</b> <b>KCA Financial Services</b> <b>628 North Street</b> <b>Box 53</b> <b>Geneva, IL 60134</b>			<b>collection</b>				<b>78.00</b>
Account No. <b>144610010304</b> <b>Loyola University Medical Center</b> <b>2160 South First Avenue</b> <b>Maywood, IL 60153</b>			<b>collection</b>				<b>50.00</b>
Account No. <b>317005860370</b> <b>Medical Payment Center</b> <b>Box 12442</b> <b>Fort Wayne, IN 46863</b>			<b>collection</b>				<b>17.00</b>
Account No. <b>317005860372</b> <b>Medical Payment Center</b> <b>Box 12442</b> <b>Fort Wayne, IN 46863</b>			<b>collection</b>				<b>29.00</b>

Sheet no. 2 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page)

**463.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>317005860369</b> <b>Medical Payment Center</b> <b>Box 12442</b> <b>Fort Wayne, IN 46863</b>			<b>collection</b>				<b>285.00</b>
Account No. <b>317005780372</b> <b>Medical Payment Center</b> <b>Box 12442</b> <b>Fort Wayne, IN 46863</b>			<b>medical service</b>				<b>226.00</b>
Account No. <b>8500555728</b> <b>Midland Credit Management</b> <b>Box 939019</b> <b>San Diego, CA 92193</b>			<b>collection</b>				<b>551.00</b>
Account No. <b>347-62-7751</b> <b>MRSI</b> <b>2200 East Devon Avenue</b> <b>Des Plaines, IL 60018</b>			<b>collection</b>				<b>227.00</b>
Account No. <b>347-62-7751</b> <b>Oxford Collection Agency</b> <b>135 Maxess Road</b> <b>Melville, NY 11747</b>			<b>collection</b>				<b>146.00</b>
Account No. <b>MCI Telecommunications</b> <b>Box 4600</b> <b>Iowa City, IA 52244-4600</b>			<b>Assignee or other notification for:</b> <b>Oxford Collection Agency</b>				
Account No. <b>050034551766</b> <b>Peoples Gas</b> <b>Special Projects</b> <b>130 East Randolph Drive</b> <b>Chicago, IL 60601-6207</b>			<b>utility service</b>				<b>673.00</b>

Sheet no. 3 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **2,108.00**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>7751</b> <b>PNC Bank, National Association</b> <b>Box 648, 227 West Dixie Avenue</b> <b>Elizabethtown, KY 42702</b>			<b>Collection</b>				<b>1,300.00</b>
Account No. <b>347-62-7751</b> <b>Providian National Bank</b> <b>4940 Johnson Drive</b> <b>Pleasanton, CA 94588</b>			<b>charge</b>				<b>2,352.56</b>
Account No. <b>Asset Acceptance Llc</b> <b>Po Box 2038</b> <b>Warren, MI 48090</b>			<b>Assignee or other notification for:</b> <b>Providian National Bank</b>				
Account No. <b>347-62-7751</b> <b>Safeway Insurance</b> <b>1 Hanger Road</b> <b>Romeoville, IL 60446</b>			<b>insurance bill</b>				<b>200.00</b>
Account No. <b>347-62-7751</b> <b>SBC</b> <b>Consumer Bankruptcy Center</b> <b>Box 769</b> <b>Arlington, TX 76004-0769</b>			<b>telephone service</b>				<b>410.00</b>
Account No. <b>363200170</b> <b>St. Joseph Hospital</b> <b>135 South La Salle Street</b> <b>Chicago, IL 60674</b>			<b>medical service</b>				<b>169.00</b>
Account No. <b>347-62-7751</b> <b>TCF Financial Services</b> <b>Box 1270</b> <b>Minneapolis, MN 55480-1270</b>			<b>collection</b>				<b>122.00</b>

Sheet no. 4 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **4,553.56**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>14120</b> <b>The University Of Illinois At Chicago</b> <b>135 South La Salle Street</b> <b>Chicago, IL 60674</b>			<b>collection</b>				<b>47.00</b>
Account No. <b>17120</b> <b>The University Of Illinois At Chicago</b> <b>135 South La Salle Street</b> <b>Chicago, IL 60674</b>			<b>collection</b>				<b>39.00</b>
Account No. <b>17120</b> <b>The University Of Illinois At Chicago</b> <b>135 South La Salle Street</b> <b>Chicago, IL 60674</b>			<b>medical service</b>				<b>45.00</b>
Account No. <b>031700578</b> <b>The University Of Illinois At Chicago</b> <b>135 South La Salle Street</b> <b>Chicago, IL 60674</b>			<b>collection</b>				<b>586.00</b>
Account No. <b>031700578</b> <b>The University Of Illinois Medical Cente</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>collection</b>				<b>184.00</b>
Account No. <b>347-62-7751</b> <b>U.S. Dept Of Education</b> <b>National Collections Center</b> <b>Box 4169</b> <b>Greenville, TX 75403-4169</b>			<b>student loan</b>				<b>4,520.22</b>
Account No. <b>8893245</b> <b>University Of Chicago Physicians Group</b> <b>Box 75307</b> <b>Chicago, IL 60675-5307</b>			<b>collection</b>				<b>30.00</b>

Sheet no. 5 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **5,451.22**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>17120</b> <b>University Of Illinois At Chicago</b> <b>Physician Gruop</b> <b>135 South La Salle Street</b> <b>Chicago, IL 60674-3293</b>			<b>medical service</b>				<b>78.00</b>
Account No. <b>57145990317005780374</b> <b>University Of Illinois At Chicago</b> <b>Physician Gruop</b> <b>135 South La Salle Street</b> <b>Chicago, IL 60674-3293</b>			<b>collection</b>				<b>188.00</b>
Account No. <b>57627040317005780377</b> <b>University Of Illinois At Chicago</b> <b>Physician Gruop</b> <b>135 South La Salle Street</b> <b>Chicago, IL 60674-3293</b>			<b>collection</b>				<b>20.00</b>
Account No. <b>317005862369</b> <b>University Of Illinois Medical Cen.</b> <b>Box 12442</b> <b>Fort Wayne, IN 46825</b>			<b>collection</b>				<b>285.00</b>
Account No. <b>317005860370</b> <b>University Of Illinois Medical Cen.</b> <b>Box 12442</b> <b>Fort Wayne, IN 46825</b>			<b>collection</b>				<b>17.00</b>
Account No. <b>317005860371</b> <b>University Of Illinois Medical Cen.</b> <b>Box 12442</b> <b>Fort Wayne, IN 46825</b>			<b>collection</b>				<b>18.00</b>
Account No. <b>031700578</b> <b>University Of Illinois Medical Center</b> <b>135 South LaSalle Street, Dept 8332</b> <b>Chicago, IL 60674</b>			<b>collection</b>				<b>227.00</b>

Sheet no. 6 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page)

**833.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>317005780379</b> <b>University Of Illinois Medical Center</b> <b>Box 12442</b> <b>Fort Wayne, TX 46825</b>			<b>collection</b>				<b>15.00</b>
Account No. <b>317005780378</b> <b>University Of Illinois Medical Center</b> <b>Box 12442</b> <b>Fort Wayne, IN 46825</b>			<b>collection</b>				<b>169.00</b>
Account No. <b>080315941</b> <b>University Of Illinois Medical Center</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>collection</b>				<b>348.00</b>
Account No. <b>031700578</b> <b>University Of Illinois Medical Center</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>medical service</b>				<b>226.00</b>
Account No. <b>031700586</b> <b>University Of Illinois Medical Center</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>collection</b>				<b>1,283.00</b>
Account No. <b>031700578-0380</b> <b>University Of Illinois Medical Center</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>collection</b>				<b>126.00</b>
Account No. <b>031700578</b> <b>University Of Illinois Medical Center</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>medical service</b>				<b>393.00</b>

Sheet no. 7 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **2,560.00**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)



IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>317005860372</b> <b>University Of Illinois Medical Center</b> <b>Box 12442</b> <b>Fort Wayne, IN 46825</b>			<b>collection</b>				<b>29.00</b>
Account No. <b>031700586-0372</b> <b>University Of Illinois Medical Center</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>collection</b>				<b>457.00</b>
Account No. <b>031700578</b> <b>University Of Illinois Medical Center</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>collection</b>				<b>184.00</b>
Account No. <b>03100578</b> <b>University Of Illinois Medical Center</b> <b>Box 12199</b> <b>Chicago, IL 60612</b>			<b>collection</b>				<b>184.00</b>
Account No.							
Account No.							
Account No.							
Account No.							

Sheet no. 8 of 8 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **854.00**

(Complete only on last sheet of Schedule F) **TOTAL** **29,814.17**  
 (Report total also on Summary of Schedules)

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>Georgio Douse</b> <b>4335 West Washington Boulevard</b> <b>Chicago, IL 60624</b>	<b>Centrix Resource Systems</b> <b>Box 17669</b> <b>Denver, CO 80217-0669</b>

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status <b>Single</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP <b>Son</b>	AGE <b>17</b>
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation <b>Letter Carrier</b> Name of Employer <b>United States Post Office</b> How long employed <b>Six Years</b> Address of Employer <b>2825 Lone Oak Parkway</b> <b>Eagan, MN 55121-9650</b>		

**INCOME:** (Estimate of average monthly income)

	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (pro rate if not paid monthly)	\$ <b>2,578.33</b>	\$ _____
2. Estimated monthly overtime	\$ _____	\$ _____
<b>3. SUBTOTAL</b>	<b>\$ 2,578.33</b>	\$ _____
<b>4. LESS PAYROLL DEDUCTIONS</b>		
a. Payroll taxes and Social Security	\$ _____	\$ _____
b. Insurance	\$ _____	\$ _____
c. Union dues	\$ _____	\$ _____
d. Other (specify) _____	\$ _____	\$ _____
<b>5. SUBTOTAL OF PAYROLL DEDUCTIONS</b>	<b>\$ 0.00</b>	\$ _____
<b>6. TOTAL NET MONTHLY TAKE HOME PAY</b>	<b>\$ 2,578.33</b>	\$ _____
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ _____	\$ _____
8. Income from real property	\$ _____	\$ _____
9. Interest and dividends	\$ _____	\$ _____
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ _____	\$ _____
11. Social Security or other government assistance (Specify) _____	\$ _____	\$ _____
12. Pension or retirement income	\$ _____	\$ _____
13. Other monthly income (Specify) _____	\$ _____	\$ _____
<b>14. SUBTOTAL OF INCOME REPORTED ON LINES 7 THROUGH 13</b>	\$ _____	\$ _____
<b>15. TOTAL MONTHLY INCOME</b> (Add amounts shown on Lines 6 through 14.)	<b>\$ 2,578.33</b>	\$ _____
<b>16. TOTAL COMBINED MONTHLY INCOME</b> \$ <b>2,578.33</b> (Report also on Summary of Schedules)		

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**None**

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<b>600.00</b>
a. Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
b. Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
2. Utilities:		
a. Electricity and heating fuel	\$	<b>250.00</b>
b. Water and sewer	\$	
c. Telephone	\$	<b>75.00</b>
d. Other <b>Haircuts/ personal hygiene</b>	\$	<b>50.00</b>
3. Home maintenance (repairs and upkeep)	\$	
4. Food	\$	<b>425.00</b>
5. Clothing	\$	<b>75.00</b>
6. Laundry and dry cleaning	\$	<b>60.00</b>
7. Medical and dental expenses	\$	<b>20.00</b>
8. Transportation (not including car payments)	\$	<b>160.00</b>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	
10. Charitable contributions	\$	
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	
b. Life	\$	
c. Health	\$	
d. Auto	\$	<b>149.00</b>
e. Other	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	
13. Installment payments (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	
b. Other	\$	
c. Other	\$	
14. Alimony, maintenance, and support paid to others	\$	
15. Payments for support of additional dependents not living at your home	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other <b>Asthma Medication For Son</b>	\$	<b>200.00</b>
<b>Viacodin</b>	\$	<b>100.00</b>
<b>CTA bus/train pass For Son</b>	\$	<b>75.00</b>
<b>18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)</b>	<b>\$</b>	<b>2,239.00</b>

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

**None**

**20. STATEMENT OF MONTHLY NET INCOME**

a. Total monthly income from Line 16 of Schedule I	\$	<b>2,578.33</b>
b. Total monthly expenses from Line 18 above	\$	<b>2,239.00</b>
c. Monthly net income (a. minus b.)	\$	<b>339.33</b>

IN RE Douse, Aviva A.

Case No. \_\_\_\_\_

Debtor(s)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 20 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

(Total shown on summary page plus 1)

Date: July 18, 2006 Signature: /s/ Aviva A. Douse  
Aviva A. Douse

Debtor

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Joint Debtor, if any)  
 [If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

(Total shown on summary page plus 1)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

**Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.**

Document Page 31 of 34  
 United States Bankruptcy Court  
 Northern District of Illinois

IN RE:

Case No. \_\_\_\_\_

Douse, Aviva A.

Chapter 13

Debtor(s)

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

**0.00 2006: approx. \$9,452.00;**  
**2005: approx. \$54,501.00; and**  
**2004: approx. \$49,824.00.**

#### 2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

*Complete a. or b., as appropriate, and c.*

None ☒ a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☐ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None ☒ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

None ☒ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

#### 10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.



#### 11. Closed financial accounts

- None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

- None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

- None ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

- None ☐ List all property owned by another person that the debtor holds or controls.

#### 15. Prior address of debtor

- None ☐ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

- None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.
- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.
- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None ☒ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: July 18, 2006 Signature /s/ Aviva A. Douse  
of Debtor **Aviva A. Douse**

Date: \_\_\_\_\_ Signature \_\_\_\_\_  
of Joint Debtor  
(if any)

\_\_\_\_\_ **0** continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*